MONTOOLY OF

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2013 JAN J. D. AM 9: 03

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4ME C MATE CENTER

JM O	UR HOTH	HEIRIS	NAM	EI I I					
ADDRESS ((number and street)	739	WILL	S101N1	ALKIE WI	4 []			<u> </u>
Ch	eck if different								
	an previously ported. (ACC)	MUS	K E 6001	<i>N</i>		الب	H _i t]	4,9,4,4,1	- 3,0,4,0
2. FEC II	DENTIFICATION N	JMBER ▼		CITY 🛦		s	TATE 🛦	ZIP C	ODE A
Co	05262	4.4		3. IS THIS REPORT		NEW (N) OR	AM (A)	ENDED	
	OF REPORT	(b) Mo	nthly Dort	Feb 20 (M2)		May 20 (M5)	Aug	20 (M8)	Nov 20 (M11) (Non-Election
(Choose	arterly Reports:		e On:	Mar 20 (M3)		Jun 20 (M6)	Sep	20 (M9)	Year Only) Dec 20 (M12) (Non-Election
(a) Ga				Apr 20 (M4)		Jul 20 (M7)	Oct	20 (M10)	Year Only) Jan 31 (YE)
L	April 15 Quarterly Report (C	(c)	12-Day		Primary (12	P)	General ((12G)	Runoff (12R)
	July 15 Quarterly Report (C	Q2)	PRE-Election Report for the	-	Convention	(12C)	Special (12S)	
	October 15 Quarterly Report (C	23)		-				l in the	
	January 31 Year-End Report (\	/E)	E	lection on				State	- H
	July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d)	30-Day POST-Electi Report for t		General (30	oG)	Runoff (3	OR)	Special (30S)
	Termination Report (TER)		•	lection on		0.6	2012	in the State	١١ صد الدال
5. Coverin	ng Period	[™] 0′°0	2 6	Ĭ,Ž	through	1 2	06	2012	
I certify that	t I have examined th	nis Report	_	_		belief it is true	e, correct and	complete.	
Type or Pri	nt Name of Treasure	er	Julia	Den	nis				
Signature o	f Treasurer	Ju	linh	enn	<u> </u>	Da	ate 1 2	1 29	2012
	nission of false, erron	eous. or in	complete infor	mation may s	ubject the pe	erson signing thi	s Report to th	ne penalties of	2 U.S.C. §437g.
	office Use Only							FEC FO Rev. 12	
FE6AN026									

R	epor	t Covering the Period: From:	1.0	0.1	2012	То:	1 2	64	201
					COLUMN A This Period			COLUMN ndar Year-	
	(a)	Cash on Hand January 1, 2 0 1 2							0,00
	(b)	Cash on Hand at Beginning of Reporting Period	C	7	1.0.6.0.	5			
	(c)	Total Receipts (from Line 19)		· · · · · · · · · · · · · · · · · · ·	1001	<u> </u>			1350
	(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)			1.160	6 [1,350
•	Tota	al Disbursements (from Line 31)			189	a [379
•	Re	sh on Hand at Close of corting Period btract Line 7 from Line 6(d))			971	<u> </u>			97.1
•	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	- [0_0	0			
D.	the	ots and Obligations Owed BY Committee (Itemize all on needule C and/or Schedule D)		· · · · · · ·	0_0	o			
_ F	1	This committee has qualified as a m	nulticandida	ate commit	tee. (see FEC FORM 1M	Л)			

Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

120210012021

DETAILED SUMMARY PAGE

of Receipts

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Write or Type Co	mmittee Name
------------------	--------------

Report Covering the Period: From:	0 0 2012	o: 12 06 2012
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	0 0 0	12500
(i) Remized (usa Schedule A)		
(ii) Unitemized	0.00	
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	0 0 0	
(b) Belitical Body Committees	000	
(b) Political Party Committees(c) Other Political Committees		
(such as PACs)	0.00	
(d) Total Contributions (add Linee		
11(a)(iii), (b), nnd (c)) (Сату	500	
Totals to Line 33, page 5)	000	1,25,0,0
12. Transfers From Affiliated/Other	000	000
Party Committees		
13. All Loans Received	0.00	0.00
	0.00	
Loan Repayments Received Offsets To Operating Expenditures		0 00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0 0 0	0.00
16. Refunds of Contributions Made		
to Federal Candidates and Other	2 - 2	
Political Committees	000	0.00
17. Other Federal Receipts		
(Dividends, Interest, etc.)	1060	0.00
(a) Non-Federal Account		
(from Schedule H3)	0_00	0.00
(b) Levin Funds (from Schedule H5)	000	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	000
19. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	1000	135,00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	0,00	13500

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	1000 1000	Outchdul Toul to Date
	(i) Federal Share	000	000
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating		
	Expenditures	1895	3790
	(c) Total Operating Expenditures	1066	3790
00	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affillated/Other Party	1895	317
22.	Committees	0.00	0 00
23.	Contributions to Federal Candidates/Committees		
	and Other Political Committees	0.00	0.00
	Independent Expenditures	A.V.O.	
25.	(use Schedule E)	0.00	0.00
	(2 U.S.C. §441a(d)) (use Schedule F)	000	0 00
	(use scriedule i)		
26.	Loan Repayments Mede	000	0.00
	Lance Manda	0,00	000
	Loans MadeRefunds of Contributions_To:		
	(a) Individuats/Persons Other Than Political Committees	0_0.0	0.00
	(b) Political Party Committees	0 0 0	000
	(c) Other Political Committees	0.0.0	0.0.0
	(such as PACs)		
	(d) Total Contribution Refunds	4 4 0	
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
29.	Other Disbursements	0.00	0.00
29.	Other Disbursements	, U ₂ U, U	
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	^ ^ ^	000
	(i) Federal Share	0,0,0	
	(ii) "Levin" Share	0.0.0	0.00
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	D 0 0	700
	Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1895	3790
30	Total Federal Disbursements		
34.	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	1895	3790

DETAILED SUMMARY PAGE

··of Disbursements

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Page 5

111.	Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans)	0.00	12500
	(from Line 11(d), page 3)		
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.0.0
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.60	12500
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1895	3790
37.	Offsets to Operating Expenditures (from Line 15, page 3)	008	000
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	1.895	3740

_			· · · · · · · · · · · · · · · · · · ·				
SC	CHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE OF				
ITI	EMIZED RECEIPTS	for each category of the	(check only one)				
		Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17				
An	y information copied from such Reports and Statements of the commercial purposes, other than using the name and	nay not be sold or used by any pe address of any political committee	erson for the purpose of soliciting contributions				
_	NAME OF COMMITTEE (in Full)						
\rangle	IN OUR MOTHERS NAM	E					
Α.	Full Name (Last, First, Middle Initial)		Date of Receipt				
	Mailing Address		M = M / D = D / Y = Y = Y = Y				
	City State	Zip Code	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.		Amount of East Hoods I am Folia				
	Name of Employer Occupation	on					
	Receipt For: Primary General Other (specify) ▼	e Year-to-Date ▼					
В.	Full Name (Last, First, Middle Initial)		Date of Receipt				
	Mailing Address		M*M / D*B / Y*Y*Y*				
	City State	Zip Code	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.						
	Name of Employer Occupation	on					
	Receipt For: Aggregat Primary General	e Year-to-Date ▼	-				
	Other (specify) ▼	<u> </u>					
c.	Full Name (Last, First, Middle Initial)		Date of Receipt				
	Mailing Address		M = M / D = D / Y = Y = Y				
	City State	Zip Code	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.						
	Name of Employer Occupation	on					
	Receipt For: Primary General Other (spenify) ▼	e Year-to-Date ▼					

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only)......

SCHEDULE B (FEC Form 3X)

SOTILEDOLL D (TEO FORM OX)	Use separate schedule(s)			IUMBER:		PAGE OF			<u> </u>
ITEMIZED DISBURSEMENTS	for each category of the	(che	ck only 7 21b	one) 22	23	[] 24		25	
	Detailed Sunimary Page		27	28a	28b	28		29	305
Any information copied from such Reports and Statem or for commercial purposes, other than using the name	nents may not be sold or used e and address of any political	by an	y perso	n for the p solicit con	purpose tributions	of solicit	ting co	ntributi mmitte	ons e.
NAME OF COMMITTEE (In Full)									
IN OUR MOTHERS NAME									
Full Name (Last, First, Middle Initial)				Date of	Disburse	amant			
". US POSTAL SERVICE				M V is	Disburse 7 / F		V V	8 V V	⊽)
Mailing Address 800 1°F STREET				10		6	20	(2
City , S	itate Zip Code								
MUSCECON / Purpose of Disbursement	UI 49440								
O_O_1					of Each	Disburs	ement	this P	eriod
Candidate Name Category/					***** *******************************	r 1]	8	95
Office Sought: House Disbursement For:								- 43	
Senate	Primary General								
President State: District:	Other (specify) OCTOBER QUARTE		,						
Full Name (Last, First, Middle Initial)	VLIUDER CHARTE	46 <i>L</i>	1	<u></u>					
В.				Date of	Disburse	ement	_		
Mailing Address				M	/ 0	Б /	V √ V		Y
City	State Zip Code							_	
Purpose of Disburgement									
. a.pood of biodelionic			\Box	Amount of Each Disbursement this Period					
Candidate Name	•	Catego Typo							
Office Sought: House Disburserr Senate	_								
	Primary ☐ General Other (specify) ▼								
State: District:									
Full Name (Last, First, Middle Initial) C.				Date of	Disburs	ement			
				MIN	/ B	- Б	7 - 7	T 7 T	V 1
Mailing Address					J L				
City	State Zip Code								
Purpose of Disbursement									
Candidate Name		Cete			of Each				eriod
		Catego Typo	e e			·		- "	
Office Sought: House Disburserr Senate	nent For: Primary General								<u></u>
	Other (specify)								
State: District:							-		
SUBTOTAL of Disbursements This Page (optional)			··· ▶		المراز المسا			.8	9,5
TOTAL This Period (last page this line number only).			·· >					8	9,5

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(3/2005)